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FACSIMILE TRANSMISSION COVER SHEET

Date: July 28, 2004

To: United States Patent and Trademark Office
Examiner: Lourdes C. Cruz; Art Unit: 2827

Fax: (703) 872-9306

Re: Application Serial No.: 09/894,728
Filing Date: 6/28/2001; First Named Inventor: Hassan S. Hashemi
Attorney Docket No.: 00CON159PC-CIP4

From: Farjami & Farjami LLP

Number of pages including the cover sheet: 11

Message:

Enclosed please find the Response to the Final Office Action dated May 6, 2004.
Thank you.

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Attorney Docket No.: 00CON159PC-CIP4

AMENDMENT COVER SHEETIN RE APPLICATION OF: Hashemi, et al.SERIAL NO.: 09/894,728 FILED: June 28, 2001FOR: Structure and Method for Fabrication of a Leadless Multi-Die Carrier

Mail Stop AF
 HONORABLE COMMISSIONER FOR PATENTS
 P.O. Box 1450. Alexandria, VA 22313-1450

Sir/Madam:

Transmitted herewith is a paper in the above-identified application. Any necessary extension of time period set for this paper is hereby requested.

No additional fee is required.

The fee has been calculated as shown below:

<input type="checkbox"/> EXTENSION FEE	RATE Non-Small Entity	RATE Small Entity	FEE
FIRST MONTH AFTER TIME PERIOD SET	110.00	55.00	\$
SECOND MONTH AFTER TIME PERIOD SET	420.00	210.00	\$
THIRD MONTH AFTER TIME PERIOD SET	950.00	475.00	\$
FOURTH MONTH AFTER TIME PERIOD SET	1,480.00	740.00	\$

TOTAL EXTENSION FEE \$ 0.00

FEE FOR EXTRA CLAIMS added by Amendment in this response:

	Column 1	Column 2	Column 3			
	Number of Claims after Amendment	Number Previously Paid for	Number of Extra Claims	RATE Non-Small Entity	RATE Small Entity	FEE
TOTAL CLAIMS	23	MINUS **30	* = 0	x 18	x 9	\$
INDEPENDENT	2	MINUS ***3	* = 0	x 86	x 43	\$
First presentation of multiple dependent claim				+ 290	+ 145	\$

TOTAL FEE FOR EXTRA CLAIMS \$ 0.00

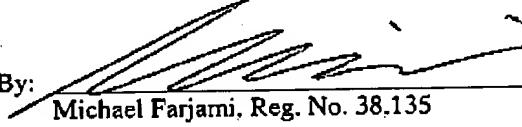
* If the entry in Column 1 is less than the entry of Column 2, write "0" in Column 3.

** If the number of Total Claims previously paid for is less than 20, write "20" in this space.

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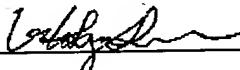
- Total fee for Supplemental Information Disclosure Statement \$
- Enclosed is the total fee of \$ 0.00 (Payment by Credit Card, Form PTO-2038 Enclosed).
- Please charge Deposit Account No. 50-0731 in the amount of \$
- The Commissioner is hereby authorized to charge payment of any additional fees associated with this communication, or credit any overpayment to Deposit Account No. 50-0731. A duplicate copy of this sheet is enclosed.

Date: 7/28/04By: 
Michael Farjami, Reg. No. 38,135CERTIFICATE OF FACSIMILE TRANSMISSION

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Signature

LESLEY L. LAM

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Attorney Docket No.: 00CON159PC-CIP4

AMENDMENT COVER SHEET

IN RE APPLICATION OF: Hashemi, et al.

SERIAL NO.: 09/894,728 FILED: June 28, 2001

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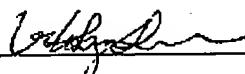
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Examiner: Cruz, Lourdes C.

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a Leadless Multi-Die Carrier

OFFICIAL

RESPONSE TO FINAL OFFICE ACTION

Mail Stop AF
Honorable Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir/Madam:

This is in response to the *Final Office Action* dated May 6, 2004 in the above-referenced patent application. Please enter and consider the following remarks.